STATEMENT OF ORGANIZATION		OFFICE USE C	
Name and Address of Committee	2. Date of this Statement	PAC	
Black Alliance for Educational Options	9/4/15	Phe S/O	
(BAEO) Action Fund Louisiana	Estimated Membership	9/21	_
Politcal Action Committee (PAC) 888 16th Street NW Suite 800		100	_
Washington, DC 20006	15		<b>5</b> 5
Washington, DO 20000	4. Amended Statement?		<b>3</b>
Check If: New Committee X	Yes _ <u>X</u> _No	#89535	15004597
5. All Committee Officers and Directors (including Chairperson, Treasu	rer, if any, and any other committee	officers and directors)	<b>7</b>
a. Name b. Position	c. Address		
Mashea Ashton Chairperson	60 Park Place Newar	rk, NJ 07102	
Miata Fuller Treasurer	198 Van Vorst St		
	Jersey City, NJ 07302	2	
Affiliated Organizations (Any organization, other than a political committee, which directly or	indirectly established, administers,	or financially supports this committee	e.)
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee	
Black Alliance for Educational 888 16th Street NW Suite 800		Related 501(c)4	
Options Action Fund Washington, DC 20	0006	Netated 501(c)4	
7. All Depositories for Committee Funds (committee funds must be defunds.)	posited in one or more banks or savi	ngs and loan institutions or money n	narket mutual
a. <u>Name</u> b. <u>Address</u>			
Northern Trust 526 E. Wisconsin A Milwaukee, WI 532			
IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Committee	Check one: Principal Can	npaign Committee Subsid	diary
b. Name of Candidate		c. Office Sought by the Candida	ate
9. a. Name of Person Preparing Report Jacqueline Cooper	r		
b. Daytime Telephone 202-429-2236			
10. WE HEREBY CERTIFY that the information contained in this STATE and belief.	EMENT OF ORGANIZATION is true	and correct to the best of our knowled	dge, information
This 4th day of September , 201	<b>5</b> .	C.	
Marker Mark	9	73-368-3445	
Signature of Committee Chairperson	Da	ytime Telephone Number	<del></del>
I. Mala Fello		917 968 3874	